PINE MANOR HEALTH CARE CENTER

1625 EAST MAIN STREET

CLINTONVILLE	54929	Phone: (715) 823-3135		Ownership:	Corporation
Operated from 1/	1 To 12/31	Days of Operation:	365	Highest Level License:	Skilled
Operate in Conjun	ction with	Hospital?	No	Operate in Conjunction with CBRF?	No
Number of Beds Se	t Up and St	affed (12/31/03):	76	Title 18 (Medicare) Certified?	Yes
Total Licensed Be	d Capacity	(12/31/03):	80	Title 19 (Medicaid) Certified?	Yes
Number of Residen	ts on 12/31	/03:	70	Average Daily Census:	68

Services Provided to Non-Residents		Age, Gender, and Primary Di	Length of Stay (12/31/03)					
Home Health Care	No	Primary Diagnosis		Age Groups	%		21.4	
Supp. Home Care-Personal Care	No					1 - 4 Years	41.4	
Supp. Home Care-Household Services	No	Developmental Disabilities		Under 65	8.6	•	20.0	
Day Services	No	Mental Illness (Org./Psy)	60.0	65 - 74	15.7			
Respite Care	Yes	Mental Illness (Other)	8.6	75 - 84	28.6		82.9	
Adult Day Care	Yes	Alcohol & Other Drug Abuse	0.0	85 - 94	45.7	* * * * * * * * * * * * * * * * * * *	*****	
Adult Day Health Care	Yes	Para-, Quadra-, Hemiplegic	0.0	95 & Over	95 & Over 1.4 Full-Time Equival			
Congregate Meals	Cancer				Nursing Staff per 100 Res	Nursing Staff per 100 Residents		
Home Delivered Meals	Fractures	2.9		100.0	(12/31/03)			
Other Meals	No	Cardiovascular	4.3	65 & Over	91.4			
Transportation	No	Cerebrovascular	10.0			RNs	6.3	
Referral Service	No	Diabetes	0.0	Gender	용	LPNs	8.6	
Other Services	No	Respiratory	2.9			Nursing Assistants,		
Provide Day Programming for	- 1	Other Medical Conditions	7.1	Male	38.6	Aides, & Orderlies	40.6	
Mentally Ill	No			Female	61.4	I		
Provide Day Programming for	1		100.0			1		
Developmentally Disabled	Yes				100.0	I		

Method of Reimbursement

		Medicare			edicaid		Other			Private Pay			Family Care			Managed Care					
Level of Care	No.	90	Per Diem (\$)	No.	οlo	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Total Resi- dents		
Int. Skilled Care	0	0.0	0	1	2.0	125	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	1	1.4	
Skilled Care	4	100.0	300	46	90.2	107	0	0.0	0	15	100.0	136	0	0.0	0	0	0.0	0	65	92.9	
Intermediate				4	7.8	89	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	4	5.7	
Limited Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Personal Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Residential Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Dev. Disabled				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Traumatic Brain In	j 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Ventilator-Depender	nt O	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Total	4	100.0		51	100.0		0	0.0		15	100.0		0	0.0		0	0.0		70	100.0	

************************************* Admissions, Discharges, and | Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/03 Deaths During Reporting Period | -------Deaths During Reporting Period

| Reporting Period | Reporting Period | Resident | Resid Psych. Hosp.-MR/DD Facilities 0.0 | Physically Restrained 4.3 Receiving Mechanically Altered Diets 30.0 Rehabilitation Hospitals

Other Locations

Other Locations

O.0 |

Skin Care Deaths 40.3 | With Pressure Sores 1.4 Have Advance Directives

Total Number of Discharges | With Rashes 2.9 Medications

(Including Deaths) 72 | 87.1

Receiving Psychoactive Drugs 20.0

Selected Statistics: This Facility Compared to All Similar Urban Area Facilities & Compared to All Facilities

		Own	ership:	Bed Size:		Lic	ensure:					
	This	Proprietary		50	-99	Ski	lled	All				
	Facility	Peer	Group	Peer	Group	Peer	Group	oup Faci				
	%	%	Ratio	용	Ratio	%	Ratio	%	Ratio			
Occupancy Rate: Average Daily Census/Licensed Beds	85.0	84.6	1.00	88.0	0.97	88.1	0.96	87.4	0.97			
Current Residents from In-County	65.7	75.5	0.87	72.9	0.90	69.7	0.94	76.7	0.86			
Admissions from In-County, Still Residing	26.3	18.9	1.39	20.1	1.31	21.4	1.23	19.6	1.34			
Admissions/Average Daily Census	111.8	152.9	0.73	129.5	0.86	109.6	1.02	141.3	0.79			
Discharges/Average Daily Census	105.9	154.8	0.68	130.3	0.81	111.3	0.95	142.5	0.74			
Discharges To Private Residence/Average Daily Census	51.5	63.8	0.81	52.2	0.99	42.9	1.20	61.6	0.84			
Residents Receiving Skilled Care	94.3	94.6	1.00	93.7	1.01	92.4	1.02	88.1	1.07			
Residents Aged 65 and Older	91.4	93.7	0.98	94.2	0.97	93.1	0.98	87.8	1.04			
Title 19 (Medicaid) Funded Residents	72.9	66.0	1.10	66.3	1.10	68.8	1.06	65.9	1.11			
Private Pay Funded Residents	21.4	19.0	1.13	21.6	0.99	20.5	1.04	21.0	1.02			
Developmentally Disabled Residents	2.9	0.5	5.69	0.5	5.25	0.5	5.70	6.5	0.44			
Mentally Ill Residents	68.6	31.3	2.19	36.2	1.89	38.2	1.80	33.6	2.04			
General Medical Service Residents	7.1	23.7	0.30	21.5	0.33	21.9	0.33	20.6	0.35			
Impaired ADL (Mean)	63.7	48.4	1.32	48.4	1.32	48.0	1.33	49.4	1.29			
Psychological Problems	20.0	50.1	0.40	53.4	0.37	54.9	0.36	57.4	0.35			
Nursing Care Required (Mean)	6.1	6.6	0.92	6.9	0.88	7.3	0.83	7.3	0.83			